

For Official Use Only

1. File Number U- <u>11194</u>	2. Fiscal Year Covered From: <u>1/1/04</u> Through: <u>12/31/04</u>
3. Name and address of person filing. Name <u>HENRY</u> <u>ZYLLA</u> P.O. Box, Bldg., Room No., if any Street <u>9 EAST VIEW LANE</u> City <u>OLD BROOKVILLE</u> State <u>NEW YORK</u> ZIP Code + 4 <u>11345-2008</u>	4. Name, file number, and address of labor organization. Name <u>ENGINEERS UNION LOCAL 44 - IUE</u> Labor Organization File Number <u>006</u> - CWA <u>068148</u> P.O. Box, Building and Room Number, if any <u>SUITE 130</u> Street <u>1983 MARCUS AVE.</u> City <u>LAKE SUCCESS</u> State <u>NEW YORK</u> ZIP Code + 4 <u>11042-1014</u>
5. Position in labor organization. <u>PRESIDENT</u>	

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name: _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any: _____ Street: _____ City: _____ State: _____ ZIP Code + 4: _____	7.a. Nature of Interest, Transaction, or Income. <div style="border: 1px solid black; height: 100px; width: 100%;"></div> 7.b. Amount. <div style="border: 1px solid black; height: 50px; width: 100%;"></div>

516 328-9400
Telephone Number

